	(Original Signature of Member)
11	3TH CONGRESS H.R.
1	To enhance beneficiary and provider protections and improve transparency in the Medicare Advantage market, and for other purposes.
	IN THE HOUSE OF REPRESENTATIVES
	Ms. Delauro introduced the following bill; which was referred to the Committee on
	A BILL
To	enhance beneficiary and provider protections and improve transparency in the Medicare Advantage market, and for other purposes.
1	Be it enacted by the Senate and House of Representa-
2	tives of the United States of America in Congress assembled,
3	SECTION 1. SHORT TITLE.
4	This Act may be cited as the "Medicare Advantage
5	Participant Bill of Rights Act of 2014".

1	SEC. 2. LIMITATION ON REMOVAL OF MEDICARE ADVAN-
2	TAGE PROVIDERS BY MA ORGANIZATIONS.
3	(a) LIMITATION.—Section 1852(d) of the Social Se-
4	curity Act (42 U.S.C. 1395w-22(d)) is amended by adding
5	at the end the following:
6	"(7) LIMITATION ON REMOVAL OF PROVIDERS
7	FROM MA PLANS BY MA ORGANIZATIONS.—
8	"(A) REMOVAL OF PROVIDERS WITH
9	CAUSE.—Beginning with plan year 2015, except
10	as provided in subparagraph (C), an MA orga-
11	nization offering an MA plan may only remove
12	a provider of services or a supplier from a net-
13	work of such plan if the organization has cause
14	to remove such provider or supplier.
15	"(B) Cause to remove providers.—
16	"(i) IN GENERAL.—An MA organiza-
17	tion offering an MA plan has cause to re-
18	move a provider of services or a supplier
19	from a network of such plan if the Sec-
20	retary determines that the provider or sup-
21	plier is—
22	"(I) medically negligent;
23	"(II) in violation of any legal or
24	contractual requirement applicable to
25	the provider or supplier acting within
26	the lawful scope of practice, including

1	any participation or other requirement
2	applicable to such provider or supplier
3	under this title or under any contrac-
4	tual term for such plan; or
5	"(III) otherwise unfit to furnish
6	items and services in accordance with
7	requirements of this title.
8	"(ii) Consideration of cost to ma
9	ORGANIZATIONS.—For purposes of sub-
10	paragraph (A), cost to an MA organization
11	offering an MA plan due to the participa-
12	tion of a provider of services or supplier in
13	a network of such plan does not constitute
14	cause for the MA organization to remove
15	such provider or supplier from the net-
16	work, and such cost may not be considered
17	as a factor in favor of a determination that
18	such organization has cause to remove the
19	provider.
20	"(C) EXCEPTION.—With respect to each
21	upcoming plan year, beginning with plan year
22	2015, an MA organization offering an MA plan
23	may only remove a provider of services or sup-
24	plier from a network of such plan for reasons
25	not specified in subparagraph (B)(i) before the

1	date that is 60 days before the first day of the
2	annual coordinated election period for such plan
3	year under section 1851(e)(3).
4	"(D) NOTICE AND APPEAL PROCESS.—
5	"(i) IN GENERAL.—Any removal of a
6	provider of services or supplier from a net-
7	work of an MA plan may occur only after
8	the completion of a fair notice and appeal
9	process that the Secretary shall establish
10	by regulation. Such process shall require
11	the MA organization to provide to such
12	provider or supplier and to the Secretary
13	an explanation of the reason or reasons for
14	the removal.
15	"(ii) APPLICATION.—
16	"(I) APPLICATION OF NEW PROC-
17	ESS.—In the case of a removal of a
18	provider of services or supplier from a
19	network of an MA plan occurring on
20	or after the effective date published in
21	a final rule for such fair notice and
22	appeal process, such process shall
23	apply in lieu of the process for the
24	termination or suspension of a pro-
25	rider contract under section

1	422.202(a) of title 42, Code of Fed-
2	eral Regulations.
3	"(II) CONTINUATION OF OLD
4	PROCESS.—In the case of a removal of
5	a provider of services or supplier from
6	a network of an MA plan occurring
7	before such effective date, the process
8	for the termination or suspension of a
9	provider contract under section
10	422.202(a) of title 42, Code of Fed-
11	eral Regulations, shall apply.
12	"(E) PARTICIPANT NOTICE AND PROTEC-
13	TION.—
14	"(i) NOTICE TO PARTICIPANTS OF
15	PROVIDER REMOVAL.—Not less than 60
16	days before the date on which a provider
17	of services or supplier is removed from a
18	network of an MA plan, the MA organiza-
19	tion offering such plan shall provide notifi-
20	cation of the removal to each individual en-
21	rolled in such plan receiving items or serv-
22	ices from the provider or supplier during
23	the plan year in effect on the date of re-
24	moval or during the previous plan year.
25	Such notification shall include—

1	"(I) the names and telephone
2	numbers of in-network providers of
3	services and suppliers offering items
4	and services that are the same or
5	similar to the items and services of-
6	fered by the removed provider or sup-
7	plier;
8	"(II) information regarding the
9	options available to an individual en-
10	rolled in such plan to request the con-
11	timuation of medical treatment or
12	therapy with the removed provider or
13	supplier; and
14	"(III) one or more customer serv-
15	ice telephone numbers that an indi-
16	vidual enrolled in such plan may ac-
17	cess to obtain information regarding
18	changes to the network of the plan.
19	"(ii) ANNUAL NOTICE OF CHANGE.—
20	In addition to providing the notification of
21	removal as required under clause (i), the
22	MA organization offering such MA plan
23	shall include such notification in the an-
24	nual notice of change for the MA plan for
25	the upcoming plan year.

1	"(iii) CONTINUITY OF CARE.—In any
2	case in which a provider of services or sup-
3	plier is removed from a network of an MA
4	plan, such plan shall ensure that the re-
5	moval satisfies the continuity of care re-
6	quirements under paragraph (1)(A) with
7	respect to each individual enrolled in such
8	plan receiving items or services from the
9	provider or supplier during the plan year
10	in effect on the date of removal or during
11	the previous plan year.
12	"(F) RULE OF CONSTRUCTION.—Nothing
13	in this paragraph shall be construed as affect-
14	ing the ability of a provider of services or sup-
15	plier to decline to participate in a network of an
16	MA plan.
17	"(8) Transparency in measures used by
18	MA ORGANIZATIONS TO ESTABLISH OR MODIFY PRO-
19	VIDER NETWORKS.—
20	"(A) IN GENERAL.—Beginning with plan
21	year 2016, an MA organization offering an MA
22	plan shall include the information described in
23	subparagraph (B)—
24	"(i) in the annual bid information
25	submitted by the MA organization with re-

1	spect to the MA plan under section 1854;
2	and
3	"(ii) on the Internet Web Site for the
4	MA plan.
5	"(B) INFORMATION DESCRIBED.—The in-
6	formation described in this subparagraph is the
7	following:
8	"(i) Information regarding the meas-
9	ures used by the MA organization to estab-
10	lish or modify the provider network of the
11	MA plan, including measures of the quality
12	and efficiency of providers. Such informa-
13	tion shall include the specifications, meth-
14	odology, and sample size of such measures.
15	"(ii) Other information related to the
16	establishment or modification of such pro-
17	vider network that the Secretary deter-
18	mines appropriate.
19	"(C) LIMITATION.—The information de-
20	scribed in subparagraph (B) shall not include
21	any individually identifiable information of any
22	provider or supplier of services.".
23	(b) Enforcement.—

1	(1) SANCTIONS FOR NONCOMPLIANCE.—Section
2	1857(g)(1) of the Social Security Act (42 U.S.C.
3	1395w-27(g)(1)) is amended—
4	(A) in subparagraph (J), by striking "or";
5	(B) by redesignating subparagraph (K) as
6	subparagraph (L);
7	(C) by inserting after subparagraph (J)
8	the following new subparagraph:
9	"(K) fails to comply with sections
10	1852(d)(7) or 1852(d)(8); or"; and
11	(D) in subparagraph (L) (as so redesig-
12	nated), by striking "through (J)" and inserting
13	"through (K)".
14	(2) SANCTIONS NOT APPLICABLE TO PART D.—
15	Title XVIII of the Social Security Act is amended—
16	(A) in section $1860D-12(b)(3)(E)$ (42)
17	U.S.C. $1395w-112(b)(3)(E)$, by striking
18	"paragraph (1)(F)" and inserting "paragraphs
19	(1)(F) and (1)(K)"; and
20	(B) in section $1894(e)(6)(B)$ (42 U.S.C.
21	1395eee(e)(6)(B)), by inserting "(other than
22	paragraph (1)(K) of such section)" after
23	"1857(g)(1)".
24	(c) NETWORK ACCESS ADEQUACY STANDARDS.—Be-
25	ginning with plan year 2015, in applying the network ac-

- 1 cess advocated standards pursuant to section 1852(d)(1)
- 2 of the Social Security Act (42 U.S.C. 1395w-22(d)(1)),
- 3 the Secretary of Health and Human Services shall seek
- 4 input from patient advocacy groups, providers of services
- 5 and suppliers, and MA plans under part C of title XVIII
- 6 of such Act.
- 7 (d) MEDICARE ADVANTAGE PLAN COMPARE TOOL.—
- 8 Not later than September 30, 2015, the Secretary of
- 9 Health and Human Services shall take such measures as
- 10 are necessary to ensure that the Medicare Advantage
- 11 Compare Tool takes into account the preferences and utili-
- 12 zation needs of such individuals.